FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

File with: lowa Ethics and Campaign Disclosure Board 510 E. 12th, Ste. 1A Des Moines, Iowa 50319 Fax: 515-281-4073

Effective January 1, 2010, all statements and reports filed by new committees for state office must be filed electronically and effective January 1, 2012, all statements and reports filed by all committees for state office must be filed electronically.

A ETHICS AND

electronically.

Effective May 1, 2010, all statements and reports for State PACs and State III JAN 21

Parties must be filed electronically.

Reset Form COMMITTEE NAME (Must be same as on Statement of Organization) FORM Steve Wilson for Supervisor Committee DR-2 DISCLOSURE IMPORTANT: Indicate by # type of committee you are reporting for: 5 (Rev. 12/2009) REPORT (1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party (4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other Political For Office Use O Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political Subdivision PAC (11) Local Ballot Issue Logged CANDIDATE COMMITTEES ONLY: Candidate Name Political Party (if applicable) Scanned Steven D. Wilson Democratic Computer Office Sought District (if Senate or House) Audited Henry County Board of Supervisors Late reports are subject to possible civil and criminal penalties. Pursuant to lowa Code sections 68B.32A(7) and 68A.401(3), the candidate, for a candidate's committee, and the chairperson, for any other type of committee, is the individual responsible for filing timely and accurate reports. SIGNATURE OF PERSON FILING REPORT I AM FILING A October 19, 2010 REPORT FOR (1) ELECTION /(2)NON-ELECTION YEAR. Indicate by # 1 (report date) ☑CHECK IF AMENDMENT TO REPORT DATED 10/19/10 Local Committees, enter Date of Election ☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3. County & Local Committees, enter County in (You must continue to file reports until a DR-3 is filed.) which Election is held Henry STATEMENT OF CASH ON HAND CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the committee. This amount MUST be the same as the cash on hand at the end 275.98 of the last reporting period or must be zero if this is first report filed.)\$ ADD TOTAL MONEY TAKEN IN THIS PERIOD 640.00 Schedule A: Cash Contributions total (Attach Schedule A) (*also see In-kind below) 0.00 Schedule F: Loans Received total (Attach Schedule F) 0.00 Schedule H: Total Sales of Campaign Property (Attach Schedule H)..... (Schedule H applies to Candidates' Committees Only) 915.98 **SUB-TOTAL.....\$** SUBTRACT TOTAL MONEY SPENT THIS PERIOD 904.35 Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)...... 0.00 Schedule F: Loan Repayments total (Attach Schedule F)..... 11.63 CASH ON HAND at the end of this reporting period (if final report balance must be zero)\$ **UNPAID BILLS (From Schedule D - Attach Schedule D).....\$ 0.00 *IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)......\$ 410.00 0.00 **OUTSTANDING LOANS (From Schedule F - Attach Schedule F)......\$ YES CONSULTANT BREAKDOWN (Schedule G Attached?) ✓ NO **CANDIDATE COMMITTEES ONLY:** 0.00 VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

For Instructions, See Back of Fo	orm
----------------------------------	-----

CONTRIBUTIONS -- MONEY TAKEN IN

(including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization) Steve Wilson for Supervisor Committee

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
	CK THIS BOX IF NDING FORM

Reset Form

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
07/19/10	CK# ₄₂₅₆	Cathryn A. Layer 600 W. Washington New London, IA 52645		\$25.00	
08/14/10	ID# CK# 9191	Beryl Shahan 705 S Adams Pl Mt. Pleasant. IA 52641-2508		20.00	1
08/14/10	ID# CK# 15461	Mrs. Glen Richenberger 206 E. Madison Mt. Pleasant, IA 52641		25.00	1
08/14/10	ID# CK# 7464	Ronald E. Osborne 102 Orchard Ln. New London, IA 52645		100.00	1
08/14/10	ID# CK# ₃₄₉₉	William Scott Vick 409 W. Broad Mt. Pleasant, IA 52641		30.00	1
08/14/10	CK# 3301	David W. Helman 1899 - 335th Street Salem, IA 52649		50.00	1
08/14/10	CK#CASH	Brent Wilson 3302 195th St. Lockridge, IA 52635	son	15.00	1
08/14/10	CK#CASH	Flint Wilson 22100 Township Road #177 Forest, OH 45843	son	25.00	1
08/14/10	ID# CK# CASH	Cathryn A. Layer 600 W. Washington New London, IA 52645		20.00	1
08/27/10	ID# CK# 17752	Deb Batey 509 E. Washington St. Mt. Pleasant, IA 52641		50.00	
			SUB-TOTAL	\$ 360.00	

Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consangulaity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

of ² (for Schedule A)

TOTAL (If last page of this schedule)

For Instructions,	See	Back	of	Form
-------------------	-----	------	----	------

Reset Form

CONTRIBUTIONS -- MONEY TAKEN IN

(including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)	
Steve Wilson for Supervisor Committee	

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
	CK THIS BOX IF NDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
09/30/10	ID# CK# ₃₁₆₉	Cindy Beasley 205 S. Locust St. Mt. Pleasant, IA 52641		\$100.00	
09/30/10	ID# CK# 3586	Dolores Wilson 203 S. Van Buren St. Mt. Pleasant, IA 52641	stepmother	100.00	
10/11/10	CK# CASH	John Wittrig 307 North Locust St. Winfield, IA 52659		30.00	
10/14/10	ID# CK# 4417	Anita Hampton 2083 Highway 34 Mt. Pleasant, IA 52641		50.00	
	ID#				
	ID# CK#				
		<u> </u>	SUB-TOTAL	s 280.00	

TOTAL (if last page of this schedule)

Page 2 of 2 (for Schedule A)

640.00

^{*} Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Reset Form

EXPENDITURES - MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES

L CHECK THIS BOX IF

AMENDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

Steve Wilson for Supervisor Committee

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
10/04/10	ID# CK#192	PrintGroup USA 130 N. Main St. Mt. Pleasant, IA 52641	Cowboy Cards (campaign literature)	\$ 321.05
10/07/10	ID# CK# 193	KILJ 2411 Radio Dr. Mt. Pleasant, IA 52641	Radio Advertising	135.00
10/08/10	ID# CK# 194	Winfield Beacon 107 E. Elm Winfield, IA 52659	Newspaper Advertisement	127.50
10/14/10	ID# CK# ₁₉₆	Steve Wilson 2766 Hickory Ave. Mt. Pleasant, IA 52641	reimbursement for yard signs purchased from: Premium Graphicx Signs	270.01
10/14/10	ID# CK# ₁₉₅	Steve Wilson 2766 Hickory Ave. Mt. Pleasant, IA 52641	reimbursement for magnetic campaign vehicle signs purchased from: Signazon	50.79
c.	ID# CK#			
	ID# CK#			
	ID# CK#			
			SUD TOTAL	

SUB-TOTAL

\$ 904.35

TOTAL (if last page of this schedule)

\$ 904.35

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 68A.402(3)(i).)

Page	1	of	l	

FOR INSTRUCTIONS,	SEE BAG	CK OF	FORM
-------------------	---------	-------	-------------

COMMITTEE NAME (Must be same as on Statement of Organization)	
Steve Wilson for Supervisor Committee	

SCHEDULE E (Rev. 06/97)	IN-KIND
	K THIS BOX IF DING FORM

Reset Form

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (If applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	√ IF FOR FUND-RAISER CONTRIBUTION
08/14/10	Richard McCabe 1928 Creek View Drive Mt. Pleasant, IA 52641		Hy-Vee gas card	\$ 300.00	
10/12/10	David Brown 2500 Iowa Avenue Mt. Pleasant, IA 52641		KILJ Radio Ad	110.00	
			SUB-TOTAL	\$ 410.00	
TOTAL (if last page of this schedule)				\$ 410.00	

*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 1